Fourth Meeting of the Board
Kampala, 13-14 September 2007
at WHO Country Office

Minutes

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Participants
(full list under meeting document GHWA/Board 4/Doc.10)

Board members: Lincoln Chen (Board Chair), Eric Friedman, Francisco Eduardo de Campos, Louise Holt, Sigrun Møsgedal (Chair, Forum Organizing Committee, and Executive Director Search Committee), Anders Nordström, Francis Omaswa, Estelle Quain, Marie-Odile Waty, Miriam Were, Suwit Wibulpiprasert (Chair, GHWA Programme/Policy Committee)

Other participants: Bjarne Garden, Lord Nigel Crisp, Imogen Sharp, Manuel Dayrit, Piyu Hanvoravongchai, Naphtali Agata, Ian Bates, Sam Zaramba (Director General MOH Uganda), Melville George (WR Uganda)

Secretariat: Fabienne Adam, Jim Campbell, Gayatri Nandra, Eric de Roodenbeke
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<td>plan Board composition in context of discussion on this WG</td>
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<td>develop terms of reference for DPG</td>
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<td>DPG to meet, possibly through conference call, and submit a plan</td>
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<td>prepare letters for co-signature by Board Chair and the Executive</td>
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<td>consider a one-day annual meeting of partners as a satellite meeting to</td>
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Introduction

The agenda was adopted, with a reorganization of the agenda items. It was decided not to devote a specific time to agenda item 4 - Brief from Board Members. Rather Board members will provide briefing in the context of other agenda items.

The Chair requested Board members to express what they were expecting from their 4th meeting. A "tour de table" resulted in the identification of four areas that Board members were focussing their expectations on:

- Country actions
- Regional perspectives
- International Health Priorities in the context of GHWA 1st Forum
- Roadmap

The Board welcomed its two new members: Estelle Quain and Francisco Eduardo de Campos. GHWA is still looking for a candidate to represent West Africa..

Minutes from 3rd Board Meeting
(South Africa, April 2007 - document GHWA/Board 4/Doc.2-Rev.1)

The Minutes were adopted with the corrections which had been proposed by Board members, and as reflected in Revision 1 of the document.

GHWA Forum
(documents GHWA/Board 4/Doc.7a to 7c)

General considerations:
Sigrun introduced board document 7a "The Health Workforce: the key to better health", and reported on the work of the FOC. She requested the Board to focus on two aspects:
1. what do we expect from the Forum?
2. what are the clear messages we want to convey? (branding and roadmap)

Francis referred to the FOC 1st meeting held in June 2007 which reviewed the detailed document which had been elaborated by Neil Squires. The Forum is already attracting lots of interest and questions. Francis has been invited to a number of meetings at which he was requested to present the Forum. In WHO EURO Regional Committee, HRH has been placed on the agenda and GHWA has been asked to make a statement to the Regional Committee. The world is looking at GHWA. The Forum should address this expectation.

Francis then presented the programme of the Forum, indicated major aspects and decisions required by the Board, including:
3. in relation to the publication of a call in The Lancet special edition in the week preceding the Forum, how do we work with The Lancet to select papers (6 already received)
4. what are the themes for the scientific panels?
5. decision required on keynote speakers and panellists
6. decision required on the day/time of the closing ceremony
7. do we want a declaration?
8. endorsement (or changes) of the proposed themes
Comments made by Board members and participants resulted in the following:

**Board recommendations and decisions:**

The Board expressed the following expectations from the Forum:
- a declaration on HR
- announcement(s) - real one(s)!
- a substantive roadmap, including an advocacy strategy and mechanisms for its implementation
- a high-level commitment
- a clarification of GHWA position in the global climate, including a strong commitment to address HR crisis
- solutions for the African continent, especially in relation to the burden of diseases
- country examples of success that other countries can consider
- clear identification of what is needed at the country level
- an understanding by other sectors than health (ex. education, finance) of their impact on the HR crisis, and their role in addressing it

**Decision 1**  
FOC to consider how the Forum will address the Board expectations

GHWA Board wants to have both the technical and political dimensions managed at the Forum. Also, it wants to have the work on financing and migration well positioned for the Forum. GHWA Board wants to have a process soon initiated, involving the Financing group and the civil society advocacy groups, which would lead to the WB and IMF making an announcement that they were reconsidering/lifting country ceilings (either change targets, or confirm existing ones).

**Decision 2**  
FOC to develop the process for the roadmap implementation by politicians, partners, professional associations, civil society

Migration report will be available at WHO Executive Board meeting of 26-28 January 2008. GHWA Board wants enough attention to be given to this report during WHA 2008.

**Decision 3**  
WHO HRH to ensure that the Migration report is examined under an EB substantive technical agenda item

GHWA Board wants to be kept informed of work being undertaken for the Forum, and outstanding issues to resolve.

**Decision 4**  
FOC to think of process for keeping board members informed of FOC progress

Video to be produced for the Forum on health workers: what they bring to their community, not just health.

**Decision 5**  
FOC to consider the production of a video on health workers

Consider how to involve new initiatives (ex. new initiatives from Julio Frenk and other initiatives on global health.

**Decision 6**  
FOC to consider how to involve new initiatives in Forum

A budget for the Forum is needed.

**Decision 7**  
GHWA Secretariat to develop a budget and make a proposal on supported participants

Add to the Forum programme: south-south collaboration (including Francophone and Lusophone countries); regional platforms and observatories in side sessions; AU Commissioner to co-chair Nigel Crisp’s committee or consider an alternative senior person; consider links between education and finance.

**Decision 8**  
FOC to consider the above additions to the Forum programme
Board nominations
(report to the Board from the Nominating Committee)

The Board thanked the Nominating Committee for their work and accepted their report. The Board decided to implement its recommendation, i.e. a staggered rotational scheme as described under Annex A to be fully implemented over the next three Board meetings:

- the rotation off the Board of only one member (donor representative) at the first 2008 Board meeting;
- followed by 3 members (selected by straw ballot or attrition) at the following Board meeting; and
- full implementation with rotation or re-appointment of 3 members at each subsequent Board meeting.

Decision 9  GHWA Nominating Committee to organize rotations

The Nominating Committee will reviewed and accepted the nomination of Basile Kollo, the representative of French speaking Africa.

Accelerating country action
(document GHWA/Board 4/doc.5)

Board recommendations and decisions as a result of the presentation on Accelerating Country Action (ACA):

[Start - notes from Eric]

The report from the GHWA secretariat drew the following comments:

- Multisector Country Action Teams (MCT) may not fully effective in countries because all stakeholders, especially those outside the health sector are not fully involved. When they are involved it is at technical level, not always with political support.
- GHWA should be catalytic; in most countries MoH do not have full capacities in convening all the key stakeholders (e.g. Zambia MoH asking high level mission to mobilize all government on HRH)
- GHWA should focus on two priorities: built up MCTs and test the HRH_Action Framework(AF) and for that it should identify relevant team of stakeholders responsible for implementing the HRH_AF. GHWA funds should support this activity.
- Funding countries HRH activities may not be GHWA best advantage which should rather be to bring in the spirit of the Alliance at country level.
- National priorities should drive but the plan has to be reasonably feasible to be supported.
- Discussion on the effective amount received by countries clarified the issue in relation to the WHO programme support costs. Countries will now receive the full net amount decided by GHWA Board.
- The Capacity Project has started the utilization of the HRH_AF in Uganda and this pilot can inspire the other countries in implementing it.
- WHO-COs have a role to play in facilitating the contacts at country level but it might not be the only one to rely on.

Decision 10  GHWA should not be an additional player in the countries but a catalyst for convening actors.

Decision 11  An assessment mission should be the starting point in pathfinder countries and should identify the critical bottlenecks as well as the dynamics for setting up effective MCTs.

Decision 12  The operational model has to be further refined by the Secretariat, especially in relation to WHO-CO and the different regional organizations.

Decision 13  The first Forum will be an opportunity to organize a pathfinder country workshop allowing a dynamic of exchange between the countries.
Roadmap
(document GHWA/Board 4/doc.6)

Board recommendations and decisions as a result of the presentation of the Roadmap:

2006 World Health Report outlined what needed to be done. A concrete roadmap is needed to support the plan of action of the substantive agenda.

The roadmap is aimed at the global community, not at GHWA, and should include the destination, i.e. where we want to go. It should include benchmarks, and performance indicators and a time frame. This destination is to be part of the Forum declaration.

GHWA work plan includes its share of work for the global roadmap, together with its own roadmap. It should indicate roles at country, regional and global level.

The roadmap has to reflect the 3 pillars: production and utilization of workforce; training and retention; migration. It should include an evaluation of the financial resources required (WHR 2006 was weak on that aspect).

The roadmap is to be developed in the context of health systems and health-related MDGs, and take into account the Joint Learning Initiative and GHWA task forces reports. It should address the architecture for implementation. One group under GHWA umbrella should push for cohesive mechanism.

Although some time will be needed to obtain figures from GHWA Working Group led by D. de Ferranti, the roadmap should include figures for both the global and country levels, and include a global calendar with deadlines that different levels should deliver against. It should also include field-level needs, measurement and benchmarks. The structure of the roadmap is to be developed, knowing that analytical and financing information will come at a later stage.

Decision 14 Involve the African Economic Commission (UNECA), The World Bank (Joy Phumaphi) and the Centre for Global Development (Ruth Levine)

It needs to include concrete mechanisms (methods, assessment, lessons learnt, flexibility).

A process is to be developed for each country to set targets.

The Oslo declaration should be examined, and a reflection be made taking into account the present context.

Decision 15 Place Oslo declaration on GHWA web site

Reports from Task Forces and Working Groups
(document GHWA/Board 4/doc 4a-4d)

Board recommendations as a result of the presentation of the WG plans of work:

The Secretariat presented report on behalf of Migration and Health Workforce Financing Task Force who were not represented at the board.

Work had not started as the agreement between GHWA and the Results for Development Institute had not been issued yet. This was due to the fact that the decision and recommendations from WHO Contract Review Committee on GHWA contracts with its Working groups and Task forces had not been made.
The Migration Working Group was due to meet in November 2007 to discuss draft principles for a code of practice on health workforce migration. Technical work was proceeding well with the secretariat based at WHO HRH department and WHO and the OECD are planning a meeting in April 2008.

Decision 16  WHO HRH should ensure that GHWA is invited as observer to meetings with OECD.

Decision 17  The draft principles for the Code of Conduct should be circulated to Board members by e-mail for review.

Working Group on Scaling up Education and Training for Health Workers
Board recommendations and decisions as a result of the WG report presentation:

This Working Group will work until March 2008, and its final report released at the Forum, as one of the pillars of the roadmap. The WG should consider convening a panel and inviting panellists to give some directions on how the WG work is taken over and forward, and operationalized. The document can be a stand-alone document at the Forum, and a synthesis of it included in the roadmap. A 800-word commentary should be published in The Lancet.

WG report does not include reports from Francophone and Lusophone countries. The reports from Michelle Barzac and Cameroun should be taken into consideration and Burundi should come on board.

WG report should include good illustrations of south-south experiences, and not only vague references.

WG is requested to come up with practical solutions and suggestions, and modalities. It should specify how GHWA can support and facilitate the process, but not run it.

WG should ensure that when a county is selected, the education and training implementation process is linked to other efforts such as the IHP in the country. There is a need to have practical steps outlined for discussions with a country (i.e. what does it mean for MoH, Ministry of Finance, Ministry of Education, etc.). Ethiopia and Zambia were cited as examples. While supporting IHP-supported countries, GHWA and the Task Force will continue to work on pathfinder countries.

WG Chair should contact David de Ferranti’s group and discuss how to include costing figures in their report, and/or take this forward.

WG should consider appointing a Board member who would have a special interest in education and training.

Decision 18  The composition of the Board should be thought of in this context.

Working Group on Health Workforce Advocacy
Board recommendations and decisions as a result of the WG report presentation:

The GHWA Advocacy Working Group has transformed itself into the Health Workforce Advocacy Initiative (HWAI). A proposal including a budget for running costs was submitted to the board by Eric. Eric later recused himself from the meeting while the board deliberated on this item. It was noted that in the previous meeting, the GHWA board had decided that it did not always want to be linked to the style and content of advocacy messages and activities of this group due to the structure and composition of GHWA members and secretariat. The group therefore will not be appointed by or report to the GHWA. The work of the group is however appreciated and encouraged as a civil society member of GHWA.
Regarding funding for the HWAI, it should find alternative ways of funding as an independent NGO. GHWA should not be seen as a donor. GHWA would however support this group in their fundraising initiatives. The group focuses on health aspects other than HRH. Its vision, watch and push functions, and understanding of the HR situation are essential to GHWA. The NGO alliance should focus more on Forum. A better coordination is needed with the work done by regional bodies. Eric’s group is to join the Organizing Committee of the Forum.

**Decision 19**  The Board decided to provide catalytic funding to support a position at Eric’s office as decided at the previous board meeting. The Executive Director should review the proposals submitted, and decide where this catalytic funding and support would be best focussed, ensuring that the activities of this group remain independent from GHWA core work plan and funding. This support may include the costs of meetings of the advocacy platform.

**Work plan and budget 2008-2009**

(documents GHWA/Board 4/doc. 8a-8b)

**Briefing on the meeting of GHWA PPC (June 2007), and presentation of 2008-2009 work plan and budget**

**Board comments, recommendations and decisions as a result of the presentation by PPC Chair:**

WHO should consider how the AFRO platform will be funded beyond March 2009, when EU funding is likely to end.

Norway needs to know what WHO HRH critical functions are in relation to GHWA’s. This should include clarification on financial support to the regional platforms.

Anders should organize a discussion between WHO HRH and GHWA Secretariat to clarify roles, responsibilities and use of financial resources.

The Executive Director should ensure that observatories are included in GHWA work plan and budget. The role of observatories is not limited to a normative function.

In Brazil, observatories are funded from the national budget (US$ 1 million per year). Francisco recommends to plan the use of GHWA funds in the context of other support, particularly as PAHO/AMRO are reintroducing a HRH line in their work plan and budget. Brazil and PAHO/AMRO are cofunding 50/50 a meeting with more than 20 countries.

**Decision 20**  The Board decided that the Executive Director will have the authority to effect changes in GHWA budget approved by the Board, provided that:

- budget changes decided by the Executive Director are limited to 20%, in plus or minus, per budget heading (6 budget headings for 2008-2009), at any point in time of the budget period; and
- at any point in time of the budget period, the result of such changes should not affect, in plus or minus, the total budget approved by the Board.

**Decision 21**  Taking into account Decision 20 above, the Board approved the work plan and budget proposed by the Executive Director for the period 1 January 2008 - 31 December 2009.
Decision 22  The Board gives the mandate to GHWA PPC to perform comprehensive reviews of the work plan and budget proposed by the Executive Director in advance of the meetings of the Board, and make a recommendation to the Board in advance of its meeting. This would be the case for the work plan and budget in advance of a given period, and also for subsequent revisions of either the work plan or the budget, or both.

Development of Partners Group
(document GHWA/Board 4/doc. 9)

Board comments, recommendations and decisions as a result of the presentation by DPG:

Germany and The Netherlands expressed interest in GHWA. China, Japan and Sweden should also be approached.

The Group should review what the needs of GHWA donors are, particularly re. feedback and oversight. It should use the IHP platform.

Estelle will investigate funding options from USAID.

Decision 23  GHWA Secretariat should develop terms of reference for DPG.

Decision 24  DPG should meet, possibly through conference call, and submit a plan. The resource mobilization should be made on broad basis, not only for GHWA.

Decision 25  Executive Director to prepare letters for co-signature by Board Chair and the Executive Director to Germany, Netherlands, Sweden, Japan and China.

Decision 26  Executive Director to consider a one-day annual meeting as a satellite meeting to a Board meeting or the annual Forum